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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/764,287	01/23/2004	Michael D. Ellis	81788-4300	9180
28765 7590 05/22/2007 WINSTON & STRAWN LLP PATENT DEPARTMENT			EXAMINER	
			KARIKARI, KWASI	
	1700 K STREET, N.W. WASHINGTON, DC 20006		ART UNIT	PAPER NUMBER
			2617	
			MAIL DATE	DELIVERY MODE
			05/22/2007	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Application No. Applicant(s) 10/764,287 ELLIS ET AL. Interview Summary Examiner Art Unit Kwasi Karikari 2617 All participants (applicant, applicant's representative, PTO personnel): (1) Kwasi Karikari. (2) Pejman Sharifi. Date of Interview: 07 May 2007. Type: a) \boxtimes Telephonic b) \square Video Conference c) Personal [copy given to: 1) applicant 2) applicant's representative Exhibit shown or demonstration conducted: d) Yes e) No. If Yes, brief description: . Claim(s) discussed: 3. Identification of prior art discussed: Kivela and Willards. Agreement with respect to the claims f was reached. g was not reached. f N/A. Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: The Applicant's definition of the claimed language "modular personal network" was discussed. The Examiner would consider the Applicant's remarks when submitted officially. (A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.) THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

SUPERVISORY PATENT EXAMINER

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required